

THE RELATIONSHIP BETWEEN ADOLESCENTS' EMOTIONAL-BEHAVIORAL PROBLEMS AND THEIR LEVELS OF RESILIENCE AND SCHOOL ATTACHMENT

ERGENLERİN DUYGUSAL VE DAVRANIŞ SORUNLARI İLE YILMAZLIK VE OKULA BAĞLANMA DÜZEYLERİ ARASINDAKİ İLİŞKİ

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ABSTRACT

In this study, the relationship between secondary school adolescents' emotional-behavioral problems and their levels of resilience and school attachment was examined. The study was designed in scanning model, study objective was to determine whether there was a significant relationship among variables. Participants of the research constituted of 199 secondary school students (87 girls and 112 boys), the mean age was 12.12. Data Collection Tools were The Strength and Difficulties Questionnaire, The Child and Youth Resilience Measure (CYRM-12) and The School Attachment Scale for Children and Adolescents. Data analyses were conducted using descriptive statistics, The Pearson Product-Moment Correlation Coefficient and The Hierarchical Regression Analysis. In the study, it was determined that there was a negative-oriented significant relationship between adolescents' emotional-behavioral problems and resilience, school attachment, peer attachment and teacher attachment. On the other hand, it was determined that there was a positive-oriented significant relationship between social behaviors and resilience, school attachment, peer attachment and teacher attachment. According to results of progressive regression analysis, it was determined that resilience, school attachment, peer attachment and teacher attachment explained students' behavioral problems with 10% variance, emotional problems with 9% variance, attention deficit and hyperactivity with 6% variance, peer problems with 5% variance, and social manners with 24% variance; resilience and total school attachment explained the total difficulty by 9% variance percentage. According to findings obtained in this study, to analyze emotional and behavioral problems during pre-adolescence and adolescence periods, to conduct school-based preventive psychological counseling studies, and to include studies towards resilience and school attachment in this respect will contribute to this process.

Keywords: Adolescents, Emotional and Behavioral Problems, Resilience and School Attachment

ÖZ

Bu çalışmada ortaokul dönemindeki ergenlerin duygusal ve davranış sorunları ile psikolojik sağlamlık ve okula bağlanma düzeyleri arasındaki ilişki incelenmektedir. Araştırma tarama modelinde tasarlanmış olup, değişkenler arasında anlamlı bir ilişkinin olup olmadığının belirlenmesi amaçlanmaktadır. Araştırmanın katılımcılarını 199 ortaokul öğrencisi (87 kız ve 112 erkek) ergen oluşturmakta ve yaş ortalaması 12.12'dir. Araştırmada, ortaokul dönemindeki ergenlerin duygusal ve davranış sorunları ile psikolojik sağlamlık, okula bağlanma, arkadaşına bağlanma ve öğretmene bağlanma arasında negatif yönde anlamlı bir ilişkinin olduğu belirlenmiştir. Sosyal davranışlar ile psikolojik sağlamlık, okul bağlanma, arkadaşına bağlanma ve öğretmene bağlanma ile pozitif yönde anlamlı düzeyde bir ilişkinin olduğu belirlenmiştir. Aşamalı regresyon analizi sonuçlarına göre ise öğrencilerin davranış sorunları %10; duygusal sorunları %9, dikkat eksikliği ve aşırı hareketlilik %6; yaşıt sorunları %5 ve sosyal davranışların %24 varyans yüzdesiyle psikolojik sağlamlık, okula bağlanma, arkadaşına bağlanma ve öğretmene bağlanma tarafından açıklanırken; toplam güçlüğü ise psikolojik sağlamlık ve toplam okula bağlanma tarafından birlikte %9 varyans yüzdesiyle açıklandığı belirlenmiştir. Bu çalışmada elde edilen bulgulara göre ön-ergenlik ve ergenlik döneminde duygusal ve davranış sorunlarının incelenmesi, okul temelli önleyici psikolojik danışma çalışmalarının yapılması ve bu kapsamda psikolojik sağlamlık ve okula bağlanmayı artırıcı çalışmalara yer verilmesinin bu sürece katkı sağlayacaktır.

Anahtar Kelimeler: Ergenler, Duygusal ve Davranış Sorunlar, Psikolojik Sağlamlık ve Okul Bağlanma

1. INTRODUCTION

The young are expected to adapt to rapid changes in pre-adolescence as a period of introduction to adolescence, to have a healthy analysis of conflicts arising in relation to their environment, to begin to establish their identity, and to achieve emotional and behavioral harmony. In this respect, it is necessary to restructure adolescents' adaptation and coping skills and to support adolescents psychosocially in gaining new adaptation skills and solving a series of emotional and behavioral problems. For this purpose, there is a clear requirement to conducted extensive screening studies for determination of adolescents' emotional and behavioral problems, to popularize prevention and intervention studies, and to promote school mental health and counseling studies.

Adolescence is a special period thought to start with puberty period and end with termination of bodily growth, in which human beings experience physical, hormonal, sexual, social, emotional, personal and mental changes and developments (Kulaksızoğlu, 2002). Adolescence is a period in which explicit and rapid changes are observed, differences related to the level of social, cultural and individual maturation are experienced in terms of passage from childhood to adolescence, start, duration and termination (Polvan, 2000). Together with rapid changes experienced in different areas, adolescents must learn appropriate adult behavior by leaving many childish behaviors during this period. In this period progressing slowly and containing failures; social pressure, personal requirements and change in expectations bring along new skills, new habits to be obtained in terms of health and new attitudes to develop in terms of adaptation (Tamar, 2005). However, many problems experienced in this process, developmental crises not resolved during childhood, family and school relations, peer relations, and unacquired skills related to preparation to social life, and many other risk factors may transform this period into a more critical in terms of adaptation and coping (Trotter, 1989).

Mental health problems during adolescence have a distinct importance. That is because development of adolescent's mental health does not proceed like a straight line, quite the contrary, it has a profile drawing many zigzags. As adolescent's attempt to create an identity becomes evident, adolescent also tries to complete his/her spiritual development in a healthy way, as well as to fulfill his/her period-specific development assignments (Yörükoğlu, 1993). In this respect, while it can be considered normal for adolescents to have some emotional stresses or to exhibit false behaviors during this period, it is indicated that, when these behaviors begin to disrupt a large part of adolescent's life and reach serious levels by disrupting adaptation process, these behaviors should be considered as problems (Olmans and Emery, 1995). It is seen that children and adolescents' mental health problems have a significant impact in terms of family, school and social environment (Carli et al., 2014; Gore et al., 2011). Also, the perceived social support from parents, peers and teacher make a major contribution to the adolescents' behavior problems (Ikiz and Savi Cakar, 2012).

Problem behaviors are defined as behaviors that prevent adolescents from accomplishing their developmental duties, fulfilling expected social roles, feeling sense of competence and success, and successfully passing through the young adulthood period (Jessor, 1991). Problem behaviors observed in adolescents covers a wide spectrum of behaviors. While behaviors such as impulsive behaviors, learning problems, lack of intention, procrastination tendency or cranky behaviors experienced in some adolescents are often temporary, however, more serious problems such as eloping, school dropping, engage in risky sexual intercourse, alcohol and substance abuse may be experienced by some adolescents (Tamar, 2005). Behavior problems are considered as an important predictor of maladjustment in later life and is a predictor of negative social and mental consequences for adults (Guttmanova et al., 2007). Therefore, preventive works should be done at schools and at community level.

There are wide range of behavior problems of adolescents from depressed affect and aggression to withdrawn behavior and delinquency (Williams et al., 2009). It is reported that problems of adaptation and behavior in children and adolescents may generally arise in two ways that distinguishes between internalizing and externalizing manifestations of dysfunction (Goodman, 2007; Oldehinkel et al., 2004). Within the scope of internalization problems; emotional problems and behaviors such as depression, social introspective behavior (problems such as attention deficit, hyperactivity and behavioral problems (Goodman et al., 2010), substance abuse or criminal behaviors in which lack of control is experienced are reported within the scope of externalization problems (Moilanen, 2005). Internalizing and externalizing problems generally tend to exhibit relatively strong concurrent associations. Both types of dysfunction have behavioral and affective components, as well as characteristic cognitive features (Goodman et al., 2010). Investigation of comorbid conditions and also their links to externalizing problems, will be central to advances in

understanding the origins and development of different types of internalizing problems (Zahn-Waxler et al., 2000). While it is seen that there is a tendency to increase in externalization problems during adolescence (Kim, Hetherington, & Reiss, 1999); it is indicated that both problem groups (internalization and externalization) are seen more frequently during adolescence (Goodman, 1997).

Analyzing the factors related to adolescents' emotional and behavioral problems, it is stated that interaction between protective and risk factors are important. It is emphasized that children and adolescents can adapt and cope to the extent that they establish a balance between risky and stressful life events they experience and protective factors they bear. Preventive factors are psychological biological, sociological or cultural factors that reduce negative impact of any risk factors on outcomes of a problem or have a very low relationship with negative consequences of a problem (Romano, 2015). Protective factors include factors that change, correct or improve a person's reaction to environmental conditions and risk factors that create adaptation disorder (Rutter, 2007). It is possible to collect these factors in three headings in general. These include: child-specific reasons, supportive family environment and social reasons. Child-specific reasons are listed as having a positive humor, gender, flexibility in responsiveness, self-esteem, enough impulse control, adequate social relations, high intelligence, high academic achievement, participation in social activities, skill of easy communication and high level of self-sufficiency (Sonuvar, 1999).

Resilience is regarded as an important preventive factor in this context. Resilience is the capacity and tendency towards a rapid and repeated recovery despite negative life experiences and stress that are encountered (Rutter, 2006). Besides, it is also an important indicator of state of well-being and is closely associated with strong characteristics of personality (Yeo, 2011). For this reason, it is indicated that conducting studies on increasing resilience in children and adolescents, resilience will be teach at schools (Werner, 2005). In this respect, it is considered important to focus on preventive factors in early intervention and in prevention of adolescents' emotional and behavioral problems. It is evident that applications towards improving adolescents' resilience in schools will contribute to prevention of emotional and behavioral problems. As a matter of fact, it has been reported that, in recent years, risk factors related to children and adolescents' emotional and behavioral problems are further increased (Carli et al., 2014; Gore et al., 2011). In this respect, it will be beneficial to increase adolescents' resilience, determine and eliminate risk factors for children who have a problem of adaptation and behavior in schools.

In addition to being part of socialization among adolescents, school life (Chapman, Buckley, Sheehan and Shochet, 2013) has a very important function that plays a role in gaining a sense of living and living different attachment relationships (Catalano, Haggerty, Oesterle, Fleming and Hawking, 2004; Osterman, 2000). School attachment as a form of attachment not only prevents antisocial behaviors by playing a central role in establishing positive interpersonal relationships (prosocial socialization) but also contributes to individuals' positive improvement during childhood and adolescence (Catalano et al., 2004). While school attachment refers to emotional bond developed against school in general (Hill and Werner, 2006), it defines a situation characterized by adolescents' belief in being valuable and respected as a member of school (Samdal, Wold and Bronis, 1999); satisfaction from school life having close friends and related teachers in school and experiencing positive school experiences (Ueno, 2009). Blum (2005) lists seven key features that positively affect students' school attachment. These include: being part of a school and having a sense of belonging, liking school, perceiving support and attention from teachers, having good friends within the school, progress and interest in current and future teaching/academic process (being interested), believing in fair and effective discipline in school and participation in extracurricular activities.

School attachment is discussed as a protective factor with many fundamental developmental functions in lives of children and adolescents mainly in terms of reducing the risk of developing behavioral problems (Hawkins et al., 2001). Highly associated with children and adolescents' subjective well beings as well as their positive developmental outcomes (Konu, Lintonen and Rimpelä, 2002), school attachment is considered as a powerful determinant in children and adolescents' psychosocial adaptation (Hill and Werner, 2006). In fact, it is indicated that low level of school attachment is associated with low level of emotional and social adaptation (Vanderbilt and Augustyn, 2010), problem behaviors (Simons-Morton et al., 1999) and behaviors such as escaping from school (Bonny et al., 2000). In this respect, it can be beneficial to focus on factors that adversely affect adolescents' levels of school attachment in terms of increasing school attachment and increasing emotional and behavioral adaptation.

Considering that emotional and behavioral problems will prevent adolescents to establish a healthy identity and have negative effects on many fields such as academic, psychological and social fields, it is considered as an important need to focus more on determination of students with emotional and behavioral problems

and on prevention and intervention studies. Therefore, it is necessary to focus on emotional and behavioral problems of adolescents living pre-adolescence during secondary school period and to focus on protective and risk factors related these problems. In this study, the relationship between secondary school adolescents' emotional-behavioral problems and their levels of Resilience and school attachment was examined.

2.METHOD

The study was designed in scanning model, study objective was to determine whether there was a significant relationship among variables.

2.1. Participants of the Study

Participants of the study constituted of 199 secondary school students from a town center from the district of Isparta. Considering distribution of students as per gender, there were 87 girls (43.7%) and 112 boys (56.3%); when their distributions as per class level was analysed, study participants consisted of 54 6th-grade students (27.1%), 78 7th-grade students (39.1%) and 67 8th-grade students (33.7%). Students' age average was determined as 12.12. After necessary permits were obtained from school administration, the study was carried out with the help of School Psychological Counselor and took an average of 30 minutes. Participants were informed about voluntariness and confidentiality, and study was carried out with voluntary students.

2.2. Data Collection Tools

-Strength and Difficulties Questionnaire is a scale developed by Goodman in 1997 and used with a view to scan for mental problems in children and adolescents. There are two forms of this survey; parent and school form for 4-16-year-olds, and adolescent form that adolescents fill in themselves for 11-16-year-olds. The scale consists of 25 questions, some of which are positive, some of which are the questioning characteristics of negative behavior. These questions are collected in 5 sub-headings; behavioral problems, attention deficit and hyperactivity, emotional problems, peer problems, social behaviors. Each title is evaluated, and sum of scores from other sections excluding social behavior score give the total difficulty score. An increase in total difficulty points suggests that problematic behaviors in child or adolescent are increasing. Low scores obtained from social behaviors sub-scale and high score from other sub-scales demonstrate that there is a problem for that field (Goodman, 1999). Turkish culture adaptation and validity/reliability study were conducted by Güvenir et al (2008). In reliability studies for internal consistency of the scale, Cronbach's Alpha coefficient was found as .73 for total difficulty score, .70 for attention deficit and social score, .70 for emotional score, .54 for extreme mobility sub-score, .50 for behavior score, .22 for peer relationship score. Within the scope of this research, total difficulty score was determined as .83 for Cronbach's alpha coefficient.

-Child and Youth Resilience Measure (CYRM-12) was developed by Liebenberg, Ungar and Van de Vijver (2012) in light of data gathered from eleven different countries, and it consists of 28 items, three sub-scales and eight sub-dimensions. Measurement tool was developed using quantitative and qualitative methods from a socio-ecological standpoint. A short form of the scale was obtained from a 12-item structure. Internal consistency coefficient of the scale was determined as .84; and factor load values were determined to vary between .39 and .88 (Liebenberg, Ungar and LeBlanc, 2013). As a result of exploratory factor analysis for the scale adapted into turkish culture by Aslan (2015, it was concluded that total variance was 51.28%, and the scale had a single-factor structure with item factor loads varying between .54 and .81. Cronbach's alpha reliability coefficient of the scale was found to be .91.

-School Attachment Scale for Children and Adolescents (SAS) was developed by Hill (2006) to assess children and adolescents' levels of school attachment, and it was adapted into turkish culture by Savi (2011), the scale is a 5-point Likert-type scale. High score obtained from the scale suggests high level of school attachment. As a result of the analysis applied, it was observed that items of the scale gathered under three factors explaining 58.690% of total variance. These factors include teacher attachment, peer attachment and school attachment. As a result of internal consistency analysis, Cronbach alpha internal consistency coefficient obtained for the entire scale was found to be 0.84. Internal consistency coefficients obtained for sub-dimensions of the scale were determined as 0.82 for school attachment, 0.74 for teacher attachment and 0.71 for peer attachment; test-retest reliability coefficient was determined as 0.85 for the whole scale, two-half reliability was determined as 0.78.

2.3. Data Analysis

Data analyses in the study were conducted using descriptive statistics, Pearson Product-Moment Correlation Coefficient and Hierarchical Regression Analysis.

3. FINDINGS

Findings of the research are given in the form of descriptive statistics, correlation analysis results and results of progressive regression analysis respectively.

3.1. Descriptive statistics of the study are given in Table 1.

Table 1. Mean And Standard Deviation Values Of Participants' Scores Obtained From Measurement Tools

Variables	Arithmetic Mean	Standard Deviation
Resilience	53.5377	5.46775
Teacher Attachment	17.4824	2.80664
Peer Attachment	21.4673	3.95527
School Attachment	16.7638	3.63339
Total School Attachment	55.7136	8.75095
Behavioral Problems	8.0603	1.67464
Emotional Problems	7.6834	2.05856
Attention Deficit and Hyperact.	11.0653	1.72350
Peer Problems	9.7186	1.52461
Social Behaviors	13.2764	1.74338
Total Difficulty Score	36.5276	4.75331

As shown in Table 1, the arithmetic mean and standard deviation values of adolescents' scores from scales were determined as follows: resilience ($\bar{x}=53.5377$, $sd=5.46775$), teacher attachment ($\bar{x}=17.4824$, $sd=2.80664$), peer attachment ($\bar{x}=21.4673$, $sd=3.95527$), school attachment ($\bar{x}=16.7638$, $sd=3.63339$), total school attachment ($\bar{x}=55.7136$, $sd=8.75095$); behavioral problems ($\bar{x}=8.0603$, $sd=1.67464$), emotional problems ($\bar{x}=7.6834$, $sd=2.05856$), attention deficit and hyperactivity ($\bar{x}=11.0653$, $sd=1.72350$), peer issues ($\bar{x}=9.7186$, $sd=1.52461$), social behaviors ($\bar{x}=13.2764$, $sd=1.74338$), and total difficulties points ($\bar{x}=36.5276$, $sd=4.75331$).

3.2. The correlation' results between secondary school adolescents' emotional-behavioral problems and their levels of resilience and school attachment are given in Table 2.

Table 2. Relationship between Secondary School Adolescents' Emotional-Behavioral Problems and Their Levels of Resilience and School Attachment

	Behavior Problems	Attention Deficit/ Hyperactivity	Emotional Problems	Peer Problems	Social Behaviors
Resilience	-.236**	-.079	-.204**	-.005	.470**
School Attachment	-.205**	-.135	-.175*	-.204**	.271**
Peer Attachment	-.264**	.040	-.222**	-.100	.369**
Teacher Attachment	-.297**	-.121	-.260**	-.097	.244**
Total School Attachment	-.275**	-.105	-.235**	-.245**	.285**

As shown in Table 2, while there is a negative-oriented significant level of relationship between adolescents' resilience and their behavioral problems ($r=-.236$, $p<.01$) and emotional problems ($r=-.204$, $p<.01$), there is a positive-oriented and significant level of relationship between their Resilience and social behaviors ($r=.470$, $p<.01$). There is no significant correlation between attention deficit/hyperactivity, peer problems and resilience.

Analyzing the relationship between emotional and behavioral problems and levels of school attachment; while there is a negative oriented and significant relationship between emotional and behavioral and school attachment ($r=-.205$, $p<.01$), peer attachment ($r=-.264$, $p<.05$), teacher attachment ($r=-.297$, $p<.01$) and total school attachment ($r=-.275$, $p<.01$), there is a negative oriented and significant relationship between emotional problems and school attachment ($r=-.175$, $p<.05$), peer attachment ($r=-.222$, $p<.01$) and teacher attachment ($r=-.260$, $p<.01$) and total school attachment ($r=-.235$, $p<.01$), as well as between peer problems and school attachment ($r=-.204$, $p<.01$) and total school attachment ($r=-.245$, $p<.01$). There is a positive oriented and significant relationship between social behaviors and school attachment ($r=.271$, $p<.01$), peer attachment ($r=.369$, $p<.01$) and teacher attachment ($r=.244$, $p<.01$) and total school attachment ($r=.285$, $p<.01$). No significant correlation is found between school attachment, its sub-dimensions and attention deficit/hyperactivity.

3.3. The Results of Progressive Regression Analysis on Variables of Emotional and Behavioral Problems, Resilience and School Attachment are given in Table 3.

Table 3. Results of Progressive Regression Analysis on Prediction of Behavior Problems by Variables of Resilience and School Attachment

Variables	B (SH)	B	T	R ²
R	-.042 (.022)	-.136	-1.934	.019
R and SA	-.083 (.035)	-.179	-2.369	.046
R, SA, PA	-.094 (.039)	-.221	-2.382	.073
R, SA, PS, TA	-.145 (.052)	-.242	-2.796	.109

p<0.001

R: Resilience, SA: School Attachment, PA: Peer Attachment, TA: Teacher Attachment

Analyzing the results of progressive regression analysis, it can be seen that students' behavioral problems are explained by resilience, school attachment, peer attachment and teacher attachment with a variance percentage of 10%.

3.4. Results of Progressive Regression Analysis on Prediction of Emotional Problems by variables of Resilience and School Attachment are given in Table 4.

Table 4. Results of Progressive Regression Analysis on Prediction of Emotional Problems by variables of Resilience and School Attachment

Variables	B (SH)	β	t	R ²
R	-.077 (.026)	-.204	-2.928	.042
R and SA	-.064 (.043)	-.113	-1.466	.053
R, SA, PA	-.069 (.049)	-.133	-1.426	.062
R, SA, PA, TA	-.141 (.064)	-.192	-2.192	.087

p< 0.001

R: Resilience, SA: School Attachment, PA: Peer Attachment, TA: Teacher Attachment

Analyzing results of progressive regression analysis, it can be seen that Resilience, school attachment, peer attachment and teacher attachment together explain students' emotional problems with a variance percentage of 9%.

3.5. Results of Progressive Regression Analysis on Prediction of Emotional Problems by variables of Resilience and School Attachment are given Table 5.

Table 5. Results of Regression Analysis on Attention Deficit and Hyperactivity Problems

Variable	B (SH)	β	t	R ²
R	-.025 (.022)	-.079	-1.117	.006
R and SA	-.058 (.036)	-.122	-1.594	.019
R, SA, PA	-.102 (.041)	.235	2.498	.049
R, SA, PA, TA	-.057 (.055)	-.092	-1.036	.057

p< 0.001

R: Resilience, SA: School Attachment, PA: Peer Attachment, TA: Teacher Attachment

Analyzing the results of regression analysis, it can be seen that students' attention deficit and hyperactivity problems are explained by resilience, school attachment, peer attachment and teacher attachment with a variance percentage of 6%.

3.6. Results of Regression Analysis on Interpretation of Peer Problems are given Table 6.

Table 6. Results of Regression Analysis on Interpretation of Peer Problems

Variable	B (SH)	β	t	R ²
R	-.002 (.020)	-.005	-.076	.000
R and SA	-.100 (.032)	-.0238	-3.148	.048
R, SA, PA	-.001 (.036)	-.003	-.028	.048
R, SA, PA, TA	-.004 (.049)	-.008	-.088	.048

p< 0.001

R: Resilience, SA: School Attachment, PA: Peer Attachment, TA: Teacher Attachment

Analyzing results of progressive regression analysis, resilience, school attachment, peer attachment and teacher attachment together explain students' peer problems with a variance percentage of 5%.

3.7. Results of Regression Analysis on Prediction of Social Behaviors are given Table 6.

Table 7. Results of Regression Analysis on Prediction of Social Behaviors

Variable	B (SH)	β	t	R2
R	-.150 (.020)	.420	7.467	.221
R and SA	-.051 (.033)	.106	1.553	.230
R, SA, PA	-.071 (.037)	.161	1.925	.244
R, SA, PA, TA	-.008 (.050)	-.012	-.153	.244

$p < 0.001$

R: Resilience, SA: School Attachment, PA: Peer Attachment, TA: Teacher Attachment

Analyzing results of progressive regression analysis, resilience, school attachment, peer attachment and teacher attachment together explain students' social behaviors with a variance percentage of 24%.

3.8. The Results of Regression Analysis on Prediction of Social Behaviors are given Table 8.

Table 8. Results of Regression Analysis on Prediction of Total Difficulty

Variable	B (SH)	β	t	R2
SA	-.161 (.037)	-.296	-4.354	.088
SA and R	-.015 (.070)	-.017	-3214	.088

$p < 0.001$

R: Resilience, SA: School Attachment,

Analyzing the results of progressive regression analysis, total difficulty is explained by resilience and total school attachment by a variance percentage of 9%.

4. DISCUSSION

Analyzing correlation coefficients among variables of the research, it was determined that sub-dimensions of secondary school adolescents' emotional and behavioral problems had a negative oriented significant relationship with resilience, school attachment, friend attachment and teacher attachment. While it was determined that peer problems sub-dimension had a negative oriented significant relationship only with school attachment, no significant relationships were found between peer problems and other variables. It was determined that attention deficit and hyperactivity sub-dimensions did not have a significant relationship with resilience and school attachment. On the other hand, it was determined that social behaviors sub-dimension had a positive oriented significant relationship with resilience, school attachment, peer attachment and teacher attachment. Analyzing the results of progressive regression analysis, it was determined that resilience, school attachment, peer attachment and teacher attachment explained students' behavioral problems with 10% variance, emotional problems with 9% variance, attention deficit and hyperactivity with 6% variance, age problems with 5% variance, and social behaviors with 24% variance; and the total difficulty was explained by resilience and total school attachment by 9% variance percentage.

When the results obtained in this study are taken into consideration in light of other studies conducted in the literature; it can be seen that this study have similar results with study results emphasizing the relationship between resilience and emotional and behavioral problems. Kim and Im (2014) indicate that there is a negative relationship between resilience and inner-outer adaptation problems, and state that an individual's low level of resilience against negative life events may lead to some adaptation problems (Fergusson and Horwood, 2003) and these individuals may incline towards problematic behaviors (Leea and Cranford, 2008; Masten, 2001). In this context, supporting resilience seems to bear a protective role against problem behaviors (Rew and Horner, 2003). Also considered as ability to effectively manage stressful and risky situations (Goldstein and Brooks, 2005), resilience is emphasized to have a positive oriented relationship with feeling successful, valuable, useful, powerful, optimistic and hopeful (Wang, Haertel and Walberg, 1995) and positive sensuality (Tugade and Frederickson, 2004); emotion-editing skills (Fredrickson, Tugade, Waugh, and Larkin, 2003), self-esteem (Dumont and Provost, 1999; Werner, 1989) and high self-confidence (Rutter, 2007). In line with these results, it is understood that, as resilience increases, positive mental health in adolescents will also increase, and this case will contribute to reduction of problem behaviors associated with emotional and behavioral adaptation.

When the findings related to the relationship between behavioral problems and dimensions of school attachment, teacher attachment and peer attachment friends and behavioral problems are examined, there are similar results in the field literature, and it is emphasized that there is a positive relationship between

students' school attachment levels and their social, emotional and academic adaptations. It was determined that, as level of school attachment increased, levels of following factors decreased such as problem behaviors (Simons-Morton et al., 1999), emotional distress, suicidal thought and attempted suicide (Blum, 2005); destructiveness and criminal behaviors (Griffin, Gilbert, Lawrence, Doyle and Williams, 2003), school anger (Savi Çakar and Karataş, 2017), perception of quality of life (Savi, 2012), aggressive behavior (Hill and Werner, 2006), escaping from school (Somers and Gizzi, 2001), substance abuse (Shears, Edwards and Stanley, 2006), depression (Anderman, 2002; Bullerdick, 2000); risky behaviors (Hawkins, Catalano, Kosterman, Abbott and Hill, 1999; Jessor, Van Den Bos, Vanderryn and Costa, 1995), cheating and school problems (Murdock, Hale and Weber, 2001); smoking (Damsgaard, Holstein, Poulsen and Due, 2005; Henry and Slater, 2007); alcohol use (Henry and Slater, 2007). Dornbusch, Erickson, Laird and Wong (2001) have revealed that adolescents' positive feelings towards school reduce the possibility of emergence of abnormal behaviors. In addition, a significant correlation was found between school attachment and their mental symptoms (general function, depression and anxiety symptoms) such as depression and anxiety among adolescents in pre-adolescence (Ross, Shochet and Bellair, 2010).

Schools provide good relations with close friends and teachers and contribute positively to adolescents' development and subjective well-being (Konu, Lintonen and Rimpelä, 2002). In fact, having positive and supportive relationships with teachers is associated with more social cohesion, fewer behavioral problems, higher academic performance (Pianta, Steinberg and Rollins, 1995). Considering these positive relations in terms of resilience, these relations are thought to support the relationship between school attachment level and resilience, and this will contribute to explaining emotional and behavioral issues. As a matter of fact, it is determined that students who have low interest in school and school activities have decreased emotional and social adaptation (Vanderbilt and Augustyn, 2010), they experience school attachment problems (Duy and Yıldız, 2014). In addition, turning to negative behaviors in students prevents school attachment (Hill and Werner, 2006) and contributes to increasing emotional and behavioral problems. School appears as the most important social structure in which adolescents can realize a number of critical developmental tasks in their lives such as regulating attachment relationships and belonging to a group and developing academic skills. At the same time, school has an important function for adolescents in terms of assessing their well-being, social and emotional adaptation. Therefore, it is necessary to support and improve adolescents' school attachment as an important protective factor in their lives (Savi Çakar and Karataş, 2017).

In this respect, it is evident that determining adolescents' level of school attachment and elimination of variables that negatively affect school attachment among adolescents will contribute to the process in prevention studies for adolescents' emotional and behavioral problems by considering the fact that resilience and school attachment play the role of a protective factor in children and adolescents' mental health. There are positive relationship between adolescents' negative teachers relationship and their risk behaviors such as aggression, delinquency and depression negatively. Conversely, having positive interactions with teachers and quality of the adolescent-teacher relationship are important factors for adolescent's psychosocial adjustment (İkiz ve Savi Çakar, 2012).

In summary, in the study of prevention of emotional and behavioral problems in adolescents, determining the levels of attachment of adolescents to school and eliminating variables that affect negatively affect school attachment, considering that resilience and school attachment play a protective role in terms of mental health of children and adolescents (with teacher friend and school attachment dimensions).

5.RESULTS AND SUGGESTIONS

When the findings obtained in this study are evaluated generally, it is evident that emotional and behavioral problems are frequently experienced during pre-adolescence and adolescence period, resilience and school attachment play a role in this process, and there is a need for new studies. It can be said that it is necessary to school mental health applications and psychological guidance studies in schools and to focus on emotional and behavioral problems in secondary and high school students. It is clear that removal will contribute to this process. Additionally, it will be useful for the families, teachers and adolescents in the elementary school period to be made to acquire awareness as regards behaviour problems, the prevention and intervention programs intended for different developmental periods to be developed (Savi Çakar, 2013).

In light of findings of the research, the following suggestions were developed:

-To determine students who are experiencing emotional and behavioral problems at all levels of teaching, and to support psychological support to students determined in this context,

- To implement psycho-education programs that are prepared towards increasing resilience within the scope of emotional and behavioral problems prevention studies,
- To include activities and applications that increase school attachment at different levels of education,
- To focus on extensive studies together with family, school and adolescent by analyzing adolescents' emotional and behavioral problems and relevant risk factors.

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